WORKER'S COMPENSATION DECLARATION					
WORKER'S COMPENSATION DECLARATION					
I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified					
copy thereof (Sec. 3800 Lab. C.)					
Certified copy is hereby furnished. (1/1/94)					
Certified copy is filed with the county building inspection department.					
Date 4/05/94 Applicant In Huly					
CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE					
(This section need not be completed if the work involved by the permit is for one hundred dollars (\$100) or less.)					
I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.					
Date Applicant					
NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked. LICENSED CONTRACTORS DECLARATION					
I hereby affirm that I am licensed under provisions of Chapter 9					
(commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.					
Maria and					
License Number 57709 Lic. Class C-20					
Contractor Interlety Date 4/25/84					
I am exempt under Sec.					
B.&P.C. for this reason					
Date:					
Signature M Au					
OWNER-BUILDER DECLARATION					
I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):					
I, as owner of the property, or my employees with wages					
as their sole compensation, will do the work and the					
structure is not intended or offered for sale (Section 7044, Business and Professions Code).					
I, as owner of the property, am exclusively contracting					
with licensed contractors to construct the project (Section 7044, Business and Professions Code).					
CONSTRUCTION LENDING AGENCY					
I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).					
Lender's Name					
Lender's Address					
I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize					
representatives of this County to enter upon the above-mentioned property for inspection purposes.					

20-0046 DPW 9/89 76A364C

APPLICATION FOR PERMIT LIME GREEN

HEATING - VENTILATING - AIR CONDITIONING

COUNTY OF LOS ANGELES

DEPT OF PUBLIC WORKS

BUILDING AND SAFETY DIV.

FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)				BUILDING ADDRESS 1359 Machado
NO.	TYPE OF APPLIANCE OR EQUIPMENT	F	EE	LOCALITY NEAREST
	ABSORPTION UNIT, BTU			ASSESSOR
	AIR HANDLING UNIT, CFM			MAP BOOK SALL PAGE PARCED PARCED PROCESSED BY
	BOILER, BTU			6 9-
	COMPRESSOR, BTU			APPROVALS DATE INSPECTOR'S SIGNATURE
	VENTILATION SYSTEM			ROUGH
	EVAPORATIVE COOLER			FINAL 6/13/94
1	FURNACE: FAU GRAVITY BTU 15400	17	10	VALIDATION
+	HEATER: SUSPENDEDUNIT			
				Replacement FAU WHIT
				my.
				P.8
Plan	check fee			0,1 *34,70
PERMIT ISSUING FEE \$			60	* 3470 a
	TOTAL FEE	24	70	0.1, 쿨 ÷ 1 4 0.2
PLAN CHECK APPLICANT			0 9 = 5 6.	
NAME				04+25+94
ADDRESS				9 1
CITY TEL. NO.				
OWNER	Maria Dominsuez		1 - 1405	
MAIL ADDRES	13 = 5 100 101-			
CITY LA TEL. NO. 266 0495				
CONTR	264	10	113	
ADDRESS DI Ilous Plant				'इंडिएका इ मिठाउँ पृथीत
CITY A TEL. NO. 7 G. N.T.				
STATE	CAT TEL. NO. D	701		
LICENSE NO. CLASS CHO				

SEE REVERSE FOR EXPLANATORY LANGUAGE